

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2						
3						
4						
5						
6						
7						
8						
9						
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11	/					
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46						
47						
48						
49						
50						
TOTAL IND.	12		↓		↓	
TOTAL DEP.	2		↓		↓	
TOTAL CLAIMS	14					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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93	-					
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95						
96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.			↓		↓	
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS